FORM D



Mail Processing UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

Section APR 10 ZUUU

SEC Mail

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FORM D

NOTICE OF SALE OF SECURITIES 2200, DC PURSUANT TO REGULATION D. **SECTION 4(6), AND/OR**

SEC USE ONLY								
Prefix	Serial							
DATE RE	CEIVED							
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UNIFORM	I LIMITED OFF	ERING EXEN	APTION		
Name of Offering (check if this is an amend ORIX Kansas City, LLC	lment and name has change	d, and indicate change.	.)		·
Filing Under (Check box(es) that apply): Type of Filing: ☐ New Filing ☒ Ame	Rule 504 Rulendment	e 505 🔀 Rul	e 506	Section 4(6)	ULOE
	A. BASIC IDEN	TIFICATION DATA			
1. Enter the information requested about the is:					
Name of Issuer (☐ check if this is an amendation ORIX Kansas City, LLC	ment and name has changed	l, and indicate change.))		1
Address of Executive Offices (N 100 North Riverside Plaza, Suite 1400	lumber and Street, City, Sta), Chicago, IL 60606	te, Zip Code)		Number (Including 569-6400	g Area Code)
Address of Principal Business Operations (N (if different from Executive Offices)	lumber and Street, City, Sta	te, Zip Code)	Telephone I	Number (Including	,
Brief Description of Business The acquisition, management and sale	of undivided tenant in o	common interests in	real property.	E	PROCESSE APR 1 8 2008
Type of Business Organization	_			,	2008
corporation business trust	limited partnership, alrea limited partnership, to be	•	other (p limited	lease specify): liability company	THOMSON
Actual or Estimated Date of Incorporation or C Jurisdiction of Incorporation or Organization: (ــــــــــــــــــــــــــــــــــــــ	9 0 7 al Service abbreviation	Actual	☐ Estimated	, MANACIAL
GENERAL INSTRUCTIONS					
Federal: Who Must File: All issuers making an offering 15 U.S.C. 77d(6).	of securities in reliance on	an exemption under Re	egulation D or S	ection 4(6), 17 CF	FR 230.501 et seq. or

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION-

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

SEC 1972 (6-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; · Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and · Each general and managing partner of partnership issuers. ☐ Executive Officer ☐ Director Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner General and/or Managing Partner Full Name (Last name first, if individual) ORIX Realty Investment eXchange, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 100 North Riverside Plaza, Suite 1400, Chicago, IL 60606 Check Box(es) that Apply: □ Promoter Beneficial Owner Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) ORIX Real Estate Capital, Inc. Business or Residence Address (Number and Street, City, State, Zip Code) 100 North Riverside Plaza, Suite 1400, Chicago, IL 60606 ☐ Promoter ■ Beneficial Owner ■ Executive Officer ☐ Director General and/or Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: □ Promoter Beneficial Owner ☐ Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner ■ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Executive Officer ☐ Beneficial Owner ☐ Director Check Box(es) that Apply: ☐ Promoter General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner Executive Officer Director General and/or

Managing Partner

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	- ,	B. INFORMATION ABOUT OFFERING											
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?				_ .		iiii Oidiii						Vaa	N.
Answer also in Appendix, Column 2, if filing under ULOE. 2. What is the minimum investment that will be accepted from any individual? 3. Does the offering permit joint ownership of a single unit? 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) William White Business or Residence Address (Number and Street, City, State, Zip Code) 160 Sansone Street, 12th Floor, San Francisco, California 94104 Name of Associated Broker or Dealer Alexander Partners / K-One Investment Company States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States). [AL] [AK] [AZ] [AR] [EZ] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IX] [IV] [IV] [IV] [IV] [VA] [IVV] [WI] [WI] [WI] [WI] [WI] [WI] [WI] [WI	1. Has	the issuer s	old, or doe	s the issuer	intend to	sell, to non	-accredited	d investors	in this offe	ring?			-
2. What is the minimum investment that will be accepted from any individual? Yes No Yes No			,							-		` !	-
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3. Does the offering permit joint ownership of a single unit?	2. wna	it is the min	ıımum inve	siment ina	wiii be ac	ceptea troi	m any indi	viduai?	• • • • • • • • • • • • • • • • • • • •			· <u>\$</u>	250,000
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar renumeration for solicitation of purchasers in connection with asles of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) William White Business or Residence Address (Number and Street, City, State, Zip Code) 160 Sansome Street, 12th Floor, San Francisco, California 94104 Name of Associated Broker or Dealer Alexander Partners / K-One Investment Company States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States). [AL] [AK] [AZ] [AR] [A] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MI] [NE] [NV] [NH] [NJ] [SD] [NV] [NC] [ND] [OH] [OK] [DB] [PA] [RJ] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR] [VIII] [WIII] [WII													No
commission or similar remuneration for solicitation of purchasers in connection with sales of Securities in the officing. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) William White Business or Residence Address (Number and Street, City, State, Zip Code) 160 Sansonme Street, 12th Floor, San Francisco, California 94104 Name of Associated Broker or Dealer Alexander Partners / K-One Investment Company States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	3. Does	s the offering	ng permit j	oint owners	ship of a si	ngle unit?.				***************************************		. 🛛	
Business or Residence Address (Number and Street, City, State, Zip Code) 160 Sansome Street, 12th Floor, San Francisco, California 94104	com offer and/	mission or ring. If a po or with a st	similar ren erson to be ate or state	nuneration listed is an s, list the n	for solicita associated ame of the	tion of pur d person or broker or	chasers in agent of a dealer. If n	connection broker or on nore than fi	with sales lealer regis ve (5) pers	of securitie tered with ons to be li	es in the the SEC sted are		
Name of Associated Broker or Dealer		William White											
Name of Associated Broker or Dealer													
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Full Name (Last name first, if individual) William White Business or Residence Address (Number and Street, City, State, Zip Code) 160 Pine Street, Suite 720, San Francisco, California 94111 Name of Associated Broker or Dealer Alexander Partners States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)											=		
Business or Residence Address (Number and Street, City, State, Zip Code) 160 Pine Street, Suite 720, San Francisco, California 94111													[PR]
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¹ The issuer reserves the right, in its sole disrcretion, to allow investments below the minimum purchase price.

	B. INFORMATION ABOUT OFFERING											
										-	Yes	No
1. Has	the issuer s	old, or doe			-				•		🗆	\boxtimes
			Α	nswer also	in Append	lix, Colum	n 2, if filin	g under UL	OE.			
2. Wha	at is the mir	imum inve	estment tha	t will be ac	cepted from	m any indi	vidual?			***************************************	. <u>\$</u>	250,000
											Yes	No
3. Doe	s the offeri	ng permit j	oint owner	ship of a si	ngle unit?.	•••••			***********		🛛	
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Business or Residence Address (Number and Street, City, State, Zip Code) 218 South Water Street, Marine City, Michigan 48039												
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	Name of Associated Broker or Dealer Sigma Financial											
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1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?		B. INFORMATION ABOUT OFFERING											
Answer also in Appendix, Column 2, if filling under ULOE. 2. What is the minimum investment that will be accepted from any individual?												Yes	No
2. What is the minimum investment that will be accepted from any individual?	1. Has	the issuer s	old, or doe	s the issue	r intend to	sell, to non	-accredited	linvestors	in this offe	ring?	•••••	🗖	\boxtimes
3. Does the offering permit joint ownership of a single unit? 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) Kenneth R. Graham Business or Residence Address (Number and Street, City, State, Zip Code) 1925 Paru Street, Alameda, California 94501 Name of Associated Broker or Dealer Independent Financial Group States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) [AL] [AK] [AZ] [AR] [E] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [DI] [II] [II] [II] [II] [II] [II] [I				Α	nswer also	in Append	lix, Colum	n 2, if filin;	g under UL	OE.			
3. Does the offering permit joint ownership of a single unit? 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) Kenneth R. Graham Business or Residence Address (Number and Street, City, State, Zip Code) 1925 Paru Street, Alameda, California 94501 Name of Associated Broker or Dealer Independent Financial Group States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) [AL] [AK] [AZ] [AR] [EX] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MI] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR] Full Name (Last name first, if individual) States) [AL] [AK] [AZ] [AR] [EX] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IN] [IN] [IN] [IN] [IN] [IN] [IN] [IN	2. Wha	t is the min	imum inve	stment tha	t will be ac	cepted from	m any indi	vidual?	• • • • • • • • • • • • • • • • • • • •		***************************************	<u>\$</u>	250,000
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) Kenneth R. Graham Business or Residence Address (Number and Street, City, State, Zip Code) 1925 Paru Street, Alameda, California 94501 Name of Associated Broker or Dealer Independent Financial Group States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) [AL] [AK] [AZ] [AR] [2] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MI] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR] Full Name (Last name first, if individual) Rey Frimmersdorf Business or Residence Address (Number and Street, City, State, Zip Code) 10 Valley Oaks Place, Santa Rosa, California 95409 Name of Associated Broker or Dealer Independent Financial Group, LLC States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) [AL] [AK] [AZ] [AR] [2] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IA] [KS] [KY] [IA] [MB] [MD] [MA] [MI] [MN] [MS] [MO] [MI] [NE] [NV] [NV] [NV] [NV] [NV] [NV] [NV] [NV												Yes	No
commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) Kenneth R. Graham Business or Residence Address (Number and Street, City, State, Zip Code) 1925 Paru Street, Alameda, California 94501 Name of Associated Broker or Dealer Independent Financial Group ILL [AK] [AZ] [AR] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] ILL [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MI] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] Full Name (Last name first, if individual) Rey Frimmersdorf Business or Residence Address (Number and Street, City, State, Zip Code) 10 Valley Oaks Place, Santa Rosa, California 95409 Name of Associated Broker or Dealer Independent Financial Group, LLC States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual) States)	3. Does	the offering	ng permit j	oint owners	ship of a si	ngle unit?		••••••	*************			🛛	
Business or Residence Address (Number and Street, City, State, Zip Code) 1925 Paru Street, Alameda, California 94501	comi offer and/o	mission or ing. If a po or with a st	similar ren erson to be ate or state	nuneration listed is ar s, list the n	for solicita associated ame of the	tion of pure 1 person or broker or o	chasers in a agent of a dealer. If m	connection broker or c nore than fi	with sales dealer registed ve (5) person	of securitie tered with ons to be li	es in the the SEC sted are	<u></u>	
Business or Residence Address (Number and Street, City, State, Zip Code) 1925 Paru Street, Alameda, California 94501 Name of Associated Broker or Dealer Independent Financial Group States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)		-		f individua	1)								
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States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Name o	lame of Associated Broker or Dealer											
[Check "All States" or check individual States)													
II. IN II. IKS IKY ILA ME IMD MA MI MN IMS MO													
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RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR] Full Name (Last name first, if individual) Rey Frimmersdorf Business or Residence Address (Number and Street, City, State, Zip Code) 10 Valley Oaks Place, Santa Rosa, California 95409 Name of Associated Broker or Dealer Independent Financial Group, LLC States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) [AL] [AK] [AZ] [AR] [AZ] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MI] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]	[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN]												
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Name of Associated Broker or Dealer Independent Financial Group, LLC States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Busines	s or Reside	nce Addre				_	ie)					
Independent Financial Group, LLC States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) [AL] [AK] [AZ] [AR] [AZ] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MI] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]					sa, Camo	IIIa 23402	•						
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[RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR] Full Name (Last name first, if individual)								[MD]				[MS]	- •
Full Name (Last name first, if individual)	-			-	[NJ]		[NY]		-				
	[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
		-		f individua	1)								
Business or Residence Address (Number and Street, City, State, Zip Code) 13057 South Western Avenue, Blue Island, Illinois 60406							_	de)			-		
Name of Associated Broker or Dealer													
Omni Brokerage													
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)													
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID]	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
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	B. INFORMATION ABOUT OFFERING												
1. Has	the issuer s	old, or doe					d investors n 2, if filin		•		Yes	No	
2. Wha	t is the min	imum inve			••	·	,	•			\$	250,000	
					-						Yes	No	
com offer and/	r the inform mission or ring. If a proor with a st ciated perso	similar ren erson to be ate or state	nuneration listed is ar s, list the n	for solicita n associated name of the	tion of pur d person or broker or	chasers in agent of a dealer. If n	connection broker or on nore than fi	with sales lealer regis ve (5) pers	of securitie tered with ons to be li	the SEC sted are			
	me (Last na sella Inve									-			
	s or Reside		•				ie)					•	
Name o	1101 Third Street, NW, Albuquerque, New Mexico 87123 ame of Associated Broker or Dealer CapWest Securities, Inc.												
States in	States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)												
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MI] [NE] [NV] [NH] [NJ] [MM] [NY] [NC] [ND] [OH] [OK] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI]											[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	
	me (Last na via Villani		findividua	1)									
Busines	s or Reside	nce Addre	•			te, Zip Co	de)						
Name o	f Associate	d Broker o		Zamoma	70038		<u>.</u>	,					
States in	ni Brokera	rson Liste										10.	
(Cne	[AK]	[AZ]	eck individ [AR]	lual States)	[CO]	[CT]	[DE]	[DC]	[FL]	[CA]		1 States	
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[MI]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[RI]	[SC]	[SD]	(TN)	[TX]	[UT]	[VT]	[VA]	[WA]	[wv]	[WI]	[WY]	(PR)	
Tor	me (Last na ni Sutherla	ınd											
	s or Reside 6 Soquel		,			te, Zip Co	de)						
Name o	f Associate	d Broker o	r Dealer					,					
	ependent F										 .		
	States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)												
[AL]	[AK]	[AZ]	[AR]		[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL] [MI]	[IN] [NE]	[IA]	[KS]	[KY] [NJ]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
[RI]	[SC]	[NV] [SD]	[NH] [TN]	[TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	(PA) [PR]	

				В.	INFORMA	TION ABO	OUT OFFE	RING		·		
1. Has	the issuer s	old, or doe						in this offer	_		Yes	No ⊠
2. Wha	t is the mir	imum inve	stment tha	t will be ac	cepted from	n any indi	vidual?				. <u>\$</u>	250,000
3. Does	s the offeri	ng permit je	oint owner	ship of a si	ngle unit?		•••••		•••••	•••••	Yes . ⊠	No
comi offer and/	mission or ing. If a po or with a st	similar rem erson to be ate or state	nuneration listed is ar s, list the n	for solicita associated ame of the	tion of pure d person or broker or o	chasers in a agent of a dealer. If n	connection broker or o nore than fi	given, dire with sales dealer regis ve (5) perso for that bro	of securitie tered with ons to be li	the SEC sted are		
	me (Last na n Temple	ame first, i	f individua	l)								-
		nce Addre	ss (Numbe	r and Stree	t, City, Sta	te, Zip Co	ie)					
	16 South			er, UT 84	020	· · · · · · · · · · · · · · · · · · ·						
	f Associate ni Brokera		r Dealer									
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)												ll States
[IL] [IN] [IA] [KS] [KY] [ME] [MD] [MA] [MI] [MN] [MI] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK]										[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	
	me (Last na h Koehne		f individua	1)					·			
					t, City, Sta go, Califo	-				· · · · · · ·		
	f Associate											
					ends to Sol						🗆 A	ll States
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[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[wv]	[WI]	[WY]	(PR)
Full Na	me (Last n	ame first, i	f individua	1)								
Busines	s or Reside	nce Addre	ss (Numbe	r and Stree	t, City, Sta	te, Zip Co	ie)					
Name o	f Associate	d Broker o	r Dealer									-
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)										🗆 A	ll States	
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	(DE) (MD) (NC) (VA)	[DC] [MA] [ND] [WA]	(FL) [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged Amount Already Aggregate Type of Security Offering Price Sold Debt..... -0--0-\$ -0-Equity ☐ Common ☐ Preferred -0-Convertible Securities (including warrants)..... -0-Partnership Interests\$ \$ -0--0-Other (Specify <u>Undivided fractional interests in real estate</u>) \$ 8,600,000 6,444,000 Total \$ 8,600,000 6,444,000 Answer also in Appendix, Column 3, if filing under ULOE. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number Dollar Amount Investors of Purchases Accredited Investors..... 6.444.000 -0--0-Non-accredited Investors Total (for filings under Rule 504 only) S Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Type of Dollar Amount Type of Offering Security Sold Rule 505 Regulation A Rule 504 \$ 4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees **⊠** \$ Printing and Engraving Costs..... **⊠** \$ -0-Legal Fees -0-**⊠** \$ Accounting Fees..... **⊠** \$ -0-Engineering Fees **⊠** \$ -0-Sales Commission (specify finders' fees separately)..... **⊠** \$ 688,000 Other Expenses (identify): Legal, marketing, printing and mailing costs..... 188,510 ⊠ \$ Total..... **⊠** \$ 876,510

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	C. OFFERING PRICE	E, NUMBER OF INVESTORS, EXPENSES AND US	E OI	PR	OCEEDS		
b.	and total expenses furnished in response	te offering price given in response to Part C – Questo Part C – Question 4.a. This difference is the "adj	uste	d		<u>s</u>	7,723.490
5.	each of the purposes shown. If the amour	I proceeds to the issuer used or proposed to be used at for any purpose is not known, furnish an estimate the total of the payments listed must equal the adjustions to Part C – Question 4.6 above.	and	l			
			Payments to Officers. Directors & Affiliates				Payments To Others
	Salaries and fees		X	\$	-0-	□ <u>s</u>	· · · · · · · · · · · · · · · · · · ·
	Purchase of real estate			\$	329,580	X 5	5,548,982.67
	Purchase, rental or leasing and instal	ation of machinery and equipment		<u>s</u>			<u> </u>
	Construction or leasing of plant build	lings and facilities		\$			<u> </u>
	offering that may be used in exchang	ading the value of securities involved in this e for the assets or securities of another issuer		<u>s</u>		<u> </u>	3
	Repayment of indebtedness			\$			5
	Working capital		\$		□ 3	731.965	
	Fees	nal, and Due Diligence Costs and Acquisition		<u>\$</u>	912,962.33		200,000
			Ø	\$	1,242,542.33	⊠ <u> </u>	6,480,947.67
	Total Payments Listed (column total	s added)			⊠ <u>\$</u>	7,72	3,490
		D. FEDERAL SIGNATURE			 		
fol	owing signature constitutes an undertaking	gned by the undersigned duly authorized person. Ig by the issuer to furnish to the U.S. Securities and by the issuer to any non-accredited investor pursua	Exc	han	ge Commissio	n, upo	n written
lss	uer (Print or Type)	Signature		Da	ite		
OF	IX Kansas City, LLC	Milg.			4-10-	200	8
Na	me of Signer (Print or Type)	Title of Signer Print or Type)					
	Michael J. Moran	Authorized Signatory					

-ATTENTION-----

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. STATE SIGNATURE									
• • •	presently subject to any of the disqualification prov	isions	Yes No						
	See Appendix, Column 5, for state response.								
2. The undersigned issuer hereby undertakes Form D (17 CFR 239.500) at such times a	to furnish to any state administrator of any state in as required by state law.	which this notice is file	d, a notice on						
The undersigned issuer hereby undertake issuer to offerees.	es to furnish to the state administrators, upon writte	n request, information	furnished by the						
Limited Offering Exemption (ULOE) of	issuer is familiar with the conditions that must be so the state in which this notice is filed and understand, ishing that these conditions have been satisfied.								
The issuer has read this notification and knoundersigned duly authorized person.	ows the contents to be true and has duly caused this	notice to be signed on	its behalf by the						
Issuer (Print or Type)	Signature	Date	_						
ORIX Kansas City, LLC	Mily	4-10-2	2008						
Name (Print or Type)	Title (Print or Type)								
Michael J. Moran	Authorized Signatory								

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

		`	3			4			
1	Intend to non-ad investors	to sell ecredited s in State ltem 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of amount pu (Part		Disquali under Sta (if yes, explana	fication te ULOE attach ation of granted)	
				Number of Accredited		Number of Non-Accredited			
State	Yes	No -		Investors	Amount	Investors	Amount	Yes	No _
AL									
AK						ļ ;			
AZ									
AR	口						<u></u>		
CA		⊠	Undivided fractional interests in real estate	10	\$2,835,880				⊠
		E*3	\$8,600,000						
CO			Undivided fractional interests in real estate \$8,600,000	1	\$ 371,500				⊠
СТ			\$8,000,000						
DE									·
DC							<u> </u>		
FL							· · · · · · · · · · · · · · · · · · ·		
GA									
ні									
ID		0		-				- D	
IL									
IN				,					
IA									
KS									
KY						- · · ·			
LA		Ø	Undivided fractional interests in real estate	1	\$500,000				⊠
ME	-		\$8,600,000				· · · · · ·		
MD						<u> </u>	<u> </u>		
MA									
мі									
	<u> </u>	l	l	L		<u> </u>	<u> </u>	<u> </u>	

APPENDIX

1	Intend to non-ac investors (Part B-	to sell ceredited s in State	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2) Number of Number of					
C	37	N		Accredited		Non-Accredited		1,		
State MN	Yes	<u>No</u>		Investors	Amount	Investors	Amount	Yes	No □	
MS										
МО	0									
MT							-			
NE					——————————————————————————————————————					
NV			· · · · · · · · · · · · · · · ·							
NH										
NJ							•			
NM		Ø	Undivided fractional interests in real estate	2	\$1,364,000				×	
			\$8,600,000					_		
NY			-							
NC					: 					
ND										
ОĦ		⊠	Undivided fractional interests in real estate \$8,600,000	1	\$250,700				⊠	
OK			\$8,000,000							
OR		×	Undivided fractional interests in real estate	2	\$491,220			D	Ø	
PA			\$8,600,000							
RI										
SC										
SD										
TN			<u></u>							
TX		Ø	Undivided fractional interests in real estate \$8,600,000	1	\$345,700				×	

APPENDIX 1 2 3 4 Disqualification Type of security under State ULOE and aggregate offering price Intend to sell (if yes, attach explanation of to non-accredited Type of investor and investors in State offered in state amount purchased in State waiver granted) (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Accredited Non-Accredited State Yes No Investors Amount Investors Amount Yes No UT VT VA WA \boxtimes Undivided 1 \$285,000 \boxtimes fractional interests in real estate \$8,600,000



WV

WI

WY

PR